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Brenda C. McFadden

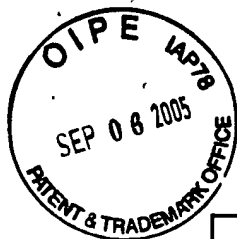
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Fee Transmittal (1 page)
Request for Continued Examination Transmittal (1 page)
Information Disclosure Statement (2 pages)
IDS (Citation) by Applicant (1 Reference) (15 pages)
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| | | | |
|---|--|--------------------------|------------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | |
| FEE TRANSMITTAL For FY 2005 | | Application Number | 09/913,819-Conf. #4515 |
| | | Filing Date | November 2, 2001 |
| | | First Named Inventor | Rene Bongers |
| | | Examiner Name | B. Q. Tieu |
| | | Art Unit | 2642 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Attorney Docket No. | 09669/006001 |
| TOTAL AMOUNT OF PAYMENT | | (\$) | 790.00 |

| | |
|---|--|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check | <input checked="" type="checkbox"/> Credit Card |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (please identify): _____ | |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha · Liang LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

| | | | | | | | |
|---|---------------------|---|---------------------------------------|----------------------|----------------------------------|----------------------|-----------------------|
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | <u>Small Entity</u> | | <u>Small Entity</u> | | <u>Small Entity</u> | |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES | | | | | | | |
| <u>Fee Description</u> | | | | | | <u>Small Entity</u> | |
| | | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| Each claim over 20 (including Reissues) | | | | | | 50 | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | <u>Multiple Dependent Claims</u> | | |
| <u>24</u> | <u>- 27 =</u> | <u>x</u> | <u>=</u> | | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | |
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | | | |
| <u>2</u> | <u>- 3 =</u> | <u>x</u> | <u>=</u> | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | | |
| <u> </u> | <u>- 100 =</u> | <u>/50</u> | <u>(round up to a whole number) x</u> | <u>=</u> | | | |
| 4. OTHER FEE(S) | | | | | | | |
| | | | | | | | <u>Fees Paid (\$)</u> |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): <u>1801 Request for continued examination (RCE) (see 37 ...</u> | | | | | | | <u>790.00</u> |

| | | | |
|---------------------|-----------------------|-----------------------------------|--------------------------|
| SUBMITTED BY | | | |
| Signature | <u>Robert P. Lord</u> | Registration No. (Attorney/Agent) | <u>46,479</u> |
| Name (Print/Type) | <u>Robert P. Lord</u> | Telephone | <u>(713) 228-8600</u> |
| | | Date | <u>September 6, 2005</u> |

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Dated: September 6, 2005

Signature: Brenda C. McFadden (Brenda C. McFadden)